2017 - 07 - 24 - 03 - 00166202

9-00068

FEC FORM 2 STATEMENT OF CANDIDACY



FEC FORM 2 (REV. 02/2009)

	2017 JUL 24: AM 9: 50		
(a) Name of Candidate (in full)			
(b) Address (number and street)	2 FEC Candidate Identification Number		
809 BAMBI AVE	2. I EG Galididate identification Number		
(c) City, State, and ZIP Code ALTAMONTE SPRINGS, FL 32714	3. Is This New Statement (N) OR (A)		
4. Party Affiliation REP 5. Office Sought 6. State & D	istrict of Candidate FLORIDA & 7		
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE			
7. I hereby designate the following named political committee as my Principal Campaign Co	mmittee for the $\frac{2018}{}$ election(s).		
NOTE: This designation should be filed with the appropriate office listed in the instructions	(year of election) s.		
(a) Name of Committee (in full)			
WEINGART FOR CONGRESS			
(b) Address (number and street)			
SOP BAMBI AVE	i		
(c) City, State, and ZIP Code			
	7-7:0		
ALTAMONTE SPRINGS, FL	32714		
DESIGNATION OF OTHER AUTHORIZE (Including Joint Fundraising Representation)			
 I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE: This designation should be filed with the principal campaign committee. 			
(a) Name of Committee (in full)	· · · · · · · · · · · · · · · · · · ·		
(b) Address (number and street)	·		
(c) City, State, and ZIP Code			
I certify that I have examined this Statement and to the best of my knowledg	e and belief it is true, correct and complete.		
Signature of Candidate	Date		
	14 JUL 2017		
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 52 U.S.C. §30109.			

FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized Committees

Page $\frac{2}{2}$ of $\frac{2}{2}$

DESIGNATION OF OTHER AUTHORIZED COMMITTEES(Including Joint Fundraising Representatives)

8.	I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE : This designation should be filed with the principal campaign committee.		
	(a) Name of Committee (in full)		
	(b) Address (number and street)		
	(c) City, State, and ZIP Code		
8.	I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behal candidacy. NOTE: This designation should be filed with the principal campaign committee.	if of my	
	(a) Name of Committee (in full)		
	(b) Address (number and street)		
	(c) City, State, and ZIP Code		
8.	I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behal candidacy. NOTE: This designation should be filed with the principal campaign committee. (a) Name of Committee (in full)	If of my	
	(b) Address (number and street)		
	(c) City, State, and ZIP Code	1	
8.	. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on beha candidacy. NOTE: This designation should be filed with the principal campaign committee.	lf of my	
	(a) Name of Committee (in full)		
	(b) Address (number and street)		
	(c) City, State, and ZIP Code	V	

WEIN CART, PATRICK D. DONOGOTOO WO LEN LON 809 BAMBI AVE ALTAMONTE SPRINGS, FL 32714

2017 JUL 24 FEDERAL CLECTION

WASHINGTON DC 20463 999 E STREET N. W.

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received. Date of Receipt **Hand Delivered** Postmarked Date of Receipt **USPS First Class Mail** Postmarked (R/C) **USPS** Registered/Certified Postmarked **USPS Priority Mail** Postmarked **USPS Priority Mail Express** Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): **Next Business Day Delivery** Date of Receipt Received from House Records & Registration Office Date of Receipt Received from Senate Public Records Office Date of Receipt Received from Electronic Filing Office

Received from Electronic Filing Office

Date of Receipt

Date of Receipt or Postmarked

Other (Specify):

PREPARER

(3/2015)